

CERTIFICATE OF MAILING OR TRANSMISSION [37 CFR 1.8(a)]		Docket Number (Optional) 030712-23	
I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to Mail Stop <u>Non-Fee Amendment</u> Commissioner for Patents, P.O. Box 1450, Alexandria, Virginia 22313-1450, or being facsimile transmitted to the USPTO at 571-273-8300 on <u>September 2, 2005</u> .		In re Application of: Makoto TERUI et al.	
Signature: <u><i>Pamela Patrick</i></u> Name: <u>Pamela Patrick</u>		Application Number: <u>10/766,896</u> Filed: <u>January 30, 2004</u> For: PASSIVE ELEMENT CHIP AND MANUFACTURING METHOD THEREOF, AND HIGHLY INTEGRATED MODULE AND MANUFACTURING METHOD THEREOF	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.		Group Art Unit: <u>2811</u> Examiner: <u>Nittin Parekh</u>	
The requested extension and appropriate entity fee are as follows (check time period desired):			
<input checked="" type="checkbox"/> One month (37 CFR 1.17(a)(1)) - (\$60/\$120)		\$ <u>120.00</u>	
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2)) - (\$225/\$450)		\$ _____	
<input type="checkbox"/> Three months (37 CFR 1.17(a)(3)) - (\$510/\$1020)		\$ _____	
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4)) - (\$795/\$1590)		\$ _____	
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5)) - (\$1080/\$2160)		\$ _____	
<input type="checkbox"/> Applicant claims small entity status.			
<input type="checkbox"/> A check to cover the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Commissioner has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number <u>19-2380</u> . I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input checked="" type="checkbox"/> attorney or agent of record.			
<input type="checkbox"/> attorney or agent under 37 CFR 1.34(a). Registration number if acting under 37 CFR 1.34(a) _____			
<u><i>Donald R. Studebaker</i></u> Signature		<u>September 2, 2005</u> Date	
<u>Donald R. Studebaker (Reg. No. 32,815)</u> Typed or printed name		<u>202-585-8000</u> Telephone Number	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input type="checkbox"/> Total of _____ forms are submitted.			

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